



West Virginia Department of Agriculture
Animal Health Division
1900 Kanawha Blvd. East
Charleston, WV 25305
304-538-2214

EQUINE EVENT REPORT

(Equidae with Official EIA Test)

Send original form to appropriate Regional Office:

_____ Guthrie Animal Health
1900 Kanawha Blvd, East
Charleston 25305

Event Name:

Event Date:

Event Location:

WVDA Representative

I hereby certify that all equidae (horses, mules, etc.) assembled for this event and listed on this Equine Event Report were accompanied by an official negative test for Equine Infectious Anemia (EIA) conducted within 12 months prior to the date of this event. **Any equine denied entry?**
__Yes __No

Signature - Sale/Show Chairman/Manager

Address (City, State, Zip)

Entry No.	Name of Owner	Owner's Address	Equidae Name	Test Date	State	Laboratory Accession No.

EQUINE EVENT REPORT (WVDA)

Continuation Sheet

[illegible]